



**COUNTY OF LOS ANGELES
DEPARTMENT OF AUDITOR-CONTROLLER**

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January 28, 2010

TO: Supervisor Gloria Molina, Chair
Supervisor Mark Ridley-Thomas
Supervisor Zev Yaroslavsky
Supervisor Don Knabe
Supervisor Michael D. Antonovich

FROM: Wendy L. Watanabe
Auditor-Controller

A handwritten signature in blue ink, reading "Wendy L. Watanabe", is written over the printed name and title.

SUBJECT: **FRED JEFFERSON MEMORIAL FOSTER FAMILY AGENCY
CONTRACT REVIEW – A DEPARTMENT OF CHILDREN AND FAMILY
SERVICES PROVIDER**

We have completed a contract compliance review of Fred Jefferson Memorial Foster Family Agency (Fred Jefferson or Agency), a Department of Children and Family Services (DCFS) provider.

Background

DCFS contracts with Fred Jefferson, a private non-profit community-based organization to recruit, train and certify foster parents for the supervision of children DCFS places in foster care. Once the Agency places a child, it is required to monitor the placement until the child is discharged from the program.

Fred Jefferson is required to hire qualified social workers to provide case management and act as a liaison between DCFS and foster parents. The Agency oversees a total of 61 certified foster homes in which 151 DCFS children were placed at the time of our review. Fred Jefferson is located in the Second District.

DCFS pays Fred Jefferson a negotiated monthly rate, per child placement, established by the California Department of Social Services' (CDSS) Foster Care Rates Bureau. Based on the child's age, Fred Jefferson receives between \$1,589 and \$1,865 per month, per child. Out of these funds, the Agency pays the foster parents between \$624

and \$790 per month, per child. DCFS paid Fred Jefferson approximately \$3,179,000 during Fiscal Year 2008-09.

Purpose/Methodology

The purpose of our review was to determine whether Fred Jefferson was providing the services outlined in their Program Statement and the County contract. We reviewed certified foster parent files, children's case files, personnel files and interviewed Fred Jefferson staff. We also visited a number of certified foster homes and interviewed several children and foster parents.

Results of Review

Fred Jefferson needs to ensure that foster homes are in compliance with the County contract and CDSS Title 22 regulations. Fred Jefferson also needs to ensure that foster home/parent certification files, Needs and Services Plans (NSPs), children's case files, Quarterly Reports and Termination Reports contain all the required information. Specifically, we visited seven foster homes and noted:

- Two homes did not adequately secure detergents and cleaning solutions. Our prior review also noted that Fred Jefferson did not ensure that staff adequately monitored foster homes to ensure the foster homes complied with the County contract and CDSS Title 22 regulations.
- One home did not have a smoke detector in the hallway leading to the children's bedroom as required by CDSS Title 22 regulations.
- One home did not have a written disaster plan in the home and two homes did not conduct disaster drills with the children upon placement and at least every six months thereafter.
- One home had a dirty bathroom, refrigerator and carpet.
- One home certification files did not contain documentation that the Agency conducted criminal/child abuse clearances for one adult that frequently resided in the foster home. Subsequent to our review, the Agency indicated that the adult no longer resided in the home and the foster parent signed a declaration indicating that she was aware of the Agency's policies regarding criminal/child abuse clearances.
- Two homes were not assessed by Fred Jefferson to determine the foster parents' ability to effectively care for more than two children prior to placing more than two children in the home. At the time of our review, six children were placed in one home and three children were placed in the second home.

- One home certification file did not contain the required foster home annual re-certification. At the time of our review, the re-certification was two months past due.
- None of the six children taking psychotropic medications had documentation in their case files that showed the children had monthly evaluations by the prescribing physician. However, the foster parents indicated that the children were seen monthly by the prescribing physician and that the children took the psychotropic medication as prescribed. In addition, the children's medication logs indicated that the children were taking their medication as prescribed.
- Two of the 19 children's initial medical examinations were not conducted within the required timeframes. One examination was conducted two months late and the other examination was 18 months past due.
- Three of the 19 children's initial dental examinations were not conducted within the required timeframes. Two of the three examinations were conducted four months late and one examination was three months past due. Our prior review also noted that Fred Jefferson did not always ensure that children's dental examinations were conducted within the required timeframes.

Our review of 19 NSPs and Quarterly Reports and 23 Termination Reports disclosed that:

- Seventeen NSPs contained goals that were not specific and measurable. In addition, five NSPs contained goals that were not time-limited.
- Sixteen NSPs were not approved by the DCFS social workers as required.
- Ten NSPs did not contain documentation that the children or the foster parents had been offered the opportunity to participate in the development of the NSPs.
- Fifteen case files did not contain documentation that the children's DCFS social workers were provided with monthly phone updates on the children's progress.
- Twelve case files did not contain documentation that the children or the DCFS social worker were provided with a comprehensive overview of the Agency's policies and procedures.
- Eight case files did not contain documentation that the children were visited weekly by the Agency social worker during the first three months of placement as required. During this period, 13 required visits were not documented for these eight children.

Our prior review also noted that Fred Jefferson did not always ensure that children were visited weekly during the first three months of placement.

- Four case files did not contain documentation that the Agency social worker visited the children every other week as required. For three children, 30 required visits were not documented during a five month period. For one child, two visits were not documented during a one month period. Prior to the start of our review, the social worker responsible for these four children was terminated.
- One case file did not contain an initial Quarterly Report. At the time of our review, the Quarterly Report was two weeks past due.
- Five Quarterly Reports reviewed did not contain the date they were sent to the DCFS social worker. As a result, we could not determine if they had been sent to the DCFS social worker timely.
- One Quarterly Report did not include the child's Emancipation Preparation Contract as required for children 14 years of age and older. Five of the 19 Quarterly Reports reviewed were for children 14 years of age or older.
- Eighteen of the 23 Termination Reports reviewed did not contain a closing summary of the Agency's records related to placement as required. Our prior review also noted that Fred Jefferson did not always ensure Termination Reports contained a closing summary of the Agency's records related to placement.

The details of our review along with recommendations for corrective action are attached.

Review of Report

We discussed our report with Fred Jefferson on August 27, 2009. In their attached response, Fred Jefferson management indicates the actions the Agency has taken to implement the recommendations (Attachment I). We also notified DCFS of the results of our review. In their response (Attachment II), DCFS indicates they will follow up on our recommendations within six months after the issuance of this report.

We thank Fred Jefferson for their cooperation and assistance during this review. Please call me if you have any questions or your staff may contact Don Chadwick at (213) 253-0301.

WLW:MMO:JET:DC:AA

Attachments

- c: William T Fujioka, Chief Executive Officer
- Patricia S. Ploehn, Director, Department of Children and Family Services
- Ted Myers, Chief Deputy Director, Department of Children and Family Services
- Susan Kerr, Senior Deputy Director, Department of Children and Family Services
- Bonita Dent, Board of Directors, Fred Jefferson Memorial FFA
- Cecelia Jefferson Freeman, Chief Executive Officer, Fred Jefferson Memorial FFA
- Jean Chen, Community Care Licensing
- Public Information Office
- Audit Committee

**FOSTER FAMILY AGENCY PROGRAM
FRED JEFFERSON MEMORIAL FOSTER FAMILY AGENCY
FISCAL YEAR 2008-09**

BILLED SERVICES

Objective

Determine whether Fred Jefferson Memorial Foster Family Agency (Fred Jefferson or Agency) provided program services in accordance with their County contract and California Department of Social Services (CDSS) Title 22 regulations.

Verification

We visited seven of the 61 Los Angeles County certified foster homes that Fred Jefferson billed the Department of Children and Family Services (DCFS) in June and July 2008 and interviewed seven foster parents and 12 children placed in the seven homes. In addition, we reviewed the case files for ten foster parents and nineteen children and we reviewed the Agency's monitoring activity. We performed our review during August and September 2008.

Results

The foster parents indicated that the services they received from Fred Jefferson generally met their expectations and the children indicated that they enjoyed living with their foster parents.

Fred Jefferson needs to ensure that foster homes are in compliance with the County contract and CDSS Title 22 regulations. Fred Jefferson also needs to ensure that foster home/parent certification files, Needs and Services Plans (NSPs), children's case files, Quarterly Reports and Termination Reports contain all the required information. We specifically noted the following:

Foster Home Visitation

- Two (29%) of the seven foster homes visited did not adequately secure detergents and cleaning solutions.
- One (14%) of the seven foster homes visited did not have a smoke detector in the hallway leading to the children's bedroom as required by CDSS Title 22 regulations.
- One (14%) of the seven foster homes visited did not have a written disaster plan in the home.

- Two (29%) of the seven foster homes visited were not conducting disaster drills with the children upon placement and at least every six months thereafter.
- One (14%) of the seven foster homes visited had a dirty bathroom, refrigerator and carpet.

Our prior review also noted that Fred Jefferson did not ensure that staff adequately monitored foster homes to ensure the foster homes complied with the County contract and CDSS Title 22 regulations.

Foster Home/Parent Certification

- One (14%) of the seven foster home certification files reviewed did not contain documentation that the Agency conducted criminal/child abuse clearances for one adult that frequently resided in the foster home. Subsequent to our review, the Agency indicated that the adult no longer resided in the home and the foster parent signed a declaration indicating that she was aware of the Agency's policies regarding criminal/child abuse clearances.
- Two (29%) of the seven foster homes reviewed were not assessed by Fred Jefferson to determine the foster parents' ability to effectively care for more than two children prior to placing more than two children in the home. At the time of our review, six children were placed in one home and three children were placed in the second home.
- One (14%) of the seven foster home certification files did not contain the required foster home annual re-certification. At the time of our review, the re-certification was two months past due.

Medical Services

- None of the six children taking psychotropic medications had documentation in their case files that showed the children had monthly evaluations by the prescribing physician. However, the foster parents indicated that the children were seen monthly by the prescribing physician and that the children took the psychotropic medication as prescribed. In addition, the children's daily medication log indicated that the children were taking their medication as prescribed.
- Two (11%) of the 19 children's initial medical examinations were not conducted within the required timeframes. One examination was conducted two months late and the other examination was 18 months past due.
- Three (16%) of the 19 children's initial dental examinations were not conducted within the required timeframes. Two examinations were conducted four months late and one examination was three months past due. Our prior review also noted

that Fred Jefferson did not always ensure that children's dental examinations were conducted within the required timeframes.

Needs and Services Plans

- Seventeen (89%) of the 19 NSPs reviewed contained goals that were not specific and measurable. In addition, five NSPs contained goals that were not time-limited.
- Sixteen (84%) of the 19 NSPs reviewed were not approved by the DCFS social workers as required.
- Ten (53%) of the 19 NSPs reviewed did not contain documentation that the children or the foster parents had been offered the opportunity to participate in the development of the NSPs.

Children's Case Files

- Fifteen (79%) of the 19 case files reviewed did not contain documentation that the children's DCFS social workers were provided with monthly phone updates on the children's progress.
- Twelve (63%) of the 19 case files reviewed did not contain documentation that the children or the DCFS social workers were provided with a comprehensive overview of the Agency's policies and procedures.
- Eight (42%) of the 19 case files reviewed did not contain documentation that the children were visited weekly by the Agency social worker during the first three months of placement as required. During this period, 13 required visits were not documented for these eight children. Our prior review also noted that Fred Jefferson did not always ensure that children were visited weekly during the first three months of placement.
- Four (21%) of the 19 case files did not contain documentation that the Agency social worker visited the children every other week as required. For three children, 30 required visits were not documented during a five month period. For one child, two visits were not documented during a one month period. Prior to the start of our review, the social worker responsible for these four children was terminated.

Quarterly Reports and Termination Reports

- One (5%) of the 19 case files reviewed did not contain an initial Quarterly Report. At the time of our review, the Quarterly Report was two weeks past due.
- Five (26%) of the 19 Quarterly Reports reviewed did not contain the date they were sent to the DCFS social worker. As a result, we could not determine if they had been sent to the DCFS social worker timely.

- One (5%) of the 19 Quarterly Reports reviewed did not include the child's Emancipation Preparation Contract as required for children 14 years of age and older. Five of the 19 Quarterly Reports reviewed were for children 14 years of age and older.
- Eighteen (78%) of the 23 Termination Reports reviewed did not contain a closing summary of the Agency's records related to placement as required. Our prior review also noted that Fred Jefferson did not always ensure Termination Reports contained a closing summary of the Agency's records related to placement.

Recommendations

Fred Jefferson management ensure:

1. **Staff adequately monitor foster homes to ensure they comply with the County contract and CDSS Title 22 regulations.**
2. **Foster parents adequately secure detergents, cleaning solutions, and other items that could pose a safety hazard to children.**
3. **Foster homes have operable smoke detectors in the hallways leading to the children's bedrooms.**
4. **Foster parents have written disaster plans, and disaster drills are conducted with children upon placement and at least every six months thereafter.**
5. **Foster homes are maintained in accordance with the County contract and CDSS Title 22 regulations.**
6. **Criminal/child abuse clearances are conducted for all adults that reside in or frequently visit the foster home.**
7. **Foster homes assessments are completed for homes where more than two children are placed.**
8. **Annual re-certification of foster homes are conducted.**
9. **Children taking psychotropic medications are seen monthly by the prescribing physician.**
10. **Children's initial medical and dental examinations are conducted within the required timeframes.**
11. **NSPs contain all required information including goals that are specific, measurable, and time-limited.**

12. NSPs are approved by the DCFS social worker as required.
13. Children and foster parents are offered the opportunity to participate in the development of the NSPs.
14. DCFS social workers are updated monthly regarding the children's progress.
15. Children and the DCFS social workers receive a comprehensive overview of the Agency's policies and procedures.
16. Children are visited weekly during the first three months of placement and twice a month, approximately 14 days apart, after the first three months of placement.
17. Quarterly Reports are prepared within the required timeframes and contain the date they were sent to the DCFS social worker.
18. Quarterly Reports include an Emancipation Preparation Contract for children who are 14 years of age and older.
19. Termination Reports include a closing summary of the Agency's records related to placement.

CLIENT VERIFICATION

Objective

Determine whether the program participants received the services that Fred Jefferson billed to DCFS.

Verification

We interviewed twelve children placed in seven Fred Jefferson certified foster homes and seven foster parents to confirm the services the Agency billed to DCFS.

Results

The foster parents indicated that the services they received from the Agency met their expectations and the foster children indicated that they enjoyed living with their foster parents.

Recommendation

None.

STAFFING/CASELOAD LEVELS**Objective**

Determine whether Fred Jefferson social workers' caseloads do not exceed fifteen placements and whether the supervising social worker does not supervise more than six social workers as required by the County contract and CDSS Title 22 regulations.

Verification

We interviewed Fred Jefferson's administrator and reviewed caseload statistics and payroll records for the Agency's social workers and supervising social worker.

Results

Overall, Fred Jefferson's 13 social workers carried an average caseload of 12 cases and the Agency's three supervising social workers supervised an average of four social workers.

Recommendation

None.

STAFFING QUALIFICATIONS**Objective**

Determine whether Fred Jefferson staff possess the education and work experience qualifications required by the County contract and CDSS Title 22 regulations. In addition, determine whether the Agency conducted hiring clearances prior to hiring and provided ongoing training to staff.

Verification

We interviewed Fred Jefferson's administrator and reviewed each staff's personnel file for documentation to confirm their education and work experience qualifications, hiring clearances and ongoing training.

Results

Fred Jefferson's administrator, supervising social workers, and social workers possessed the education and work experience required. In addition, the Agency conducted hiring clearances and provided ongoing training to staff working on the County contract.

Recommendation

None.

PRIOR YEAR FOLLOW-UP

Objective

Determine the status of the recommendations reported in the Auditor-Controller's prior monitoring review.

Verification

We verified whether the outstanding recommendations from the Fiscal Year 2005-06 monitoring review were implemented. The report was issued on March 16, 2006.

Results

The prior monitoring report contained six recommendations. The Agency implemented two recommendations. The findings related to recommendations 1, 10, 15, and 18, contained in this report were also noted in the prior year monitoring review.

Recommendation

20. Fred Jefferson management implement the four outstanding recommendations from the Fiscal Year 2005-06 monitoring report.



Fred Jefferson Memorial Foster Family Agency
1330 Long Beach Blvd.
Compton, CA. 90221

Phone # (310) 763-1660

Fax # (310) 763-0357

August 19, 2009

To: Supervisor Don Knabe, Chair
Supervisor Gloria Molina
Supervisor Mark Ridley-Thomas
Supervisor Zev Yaroslavsky
Supervisor Michael D. Antonovich

From: Dr. Cecilia Jefferson Freeman, CEO

RE: Fred Jefferson Memorial Foster Family Agency Contract Review

After reviewing the report from the Department of Auditor- Controller, Fred Jefferson Memorial Foster Family Agency is in general agreement with the findings and appreciates the following recommendations:

The following Corrective Action Plan was implemented:

Recommendation 1: Ensure staff adequately monitor foster homes to ensure they comply with the County contract and CDSS Title 22 regulations.

Quality assurance monitors will continue to monitor and evaluate the interior and exterior of all foster homes on a quarterly basis. More unannounced visits will be made to ensure that all certified foster home comply with the County contract and CDSS Title 22 regulations.

Recommendation 2: Ensure foster parents adequately secure detergents, cleaning solutions, and other items that could pose a safety hazard to children.

Quality assurance monitors will continue to monitor and evaluate the interior and exterior of all foster homes on a quarterly basis. Effective immediately, staff was sent to the identified home to verify that all items that could pose a safety hazard to children were securely locked. More unannounced visits will be made to ensure that detergents, cleaning solutions and other items that could pose a safety hazard to children are consistently locked and secured.

Recommendation 3: Ensure foster homes have operable smoke detectors in the hallways leading to the children's bedrooms.

Quality assurance monitors will continue to monitor and evaluate the interior and exterior of all foster homes on a quarterly basis. Effective immediate, staff was sent to the identified home to verify that the smoke detectors in the hallways leading to the children's bedrooms are now operable. More unannounced visits will be made to ensure that all certified foster home comply with the County contract and CDSS Title 22 regulations.

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Recommendation 4: Ensure foster parents have written disaster plans and disaster drills are conducted with the children upon placement and at least every six months thereafter.

Quality assurance monitors will continue to monitor and evaluate the interior and exterior of all foster homes on a quarterly basis. Effective immediately, staff was sent to the identified home to verify that the certified foster parent have a written disaster plan and that disaster drills are conducted on a bi-annually basis in June and December. We will continue to monitor all certified homes to ensure that foster parents have written disaster plans and that disaster drills are conducted every six months.

Recommendation 5: Ensure foster homes are maintained in accordance with the County contract and CDSS Title 22 regulations.

Quality assurance monitors will continue to monitor and evaluate the interior and exterior of all foster homes on a quarterly basis. We will continue to make every effort to ensure that all certified homes comply with the County contract and CDSS Title 22 regulations.

Recommendation 6: Ensure criminal/child abuse clearances are conducted for all adults that reside in or frequently visit the foster home.

As is our practice, all potential foster parents are fingerprinted and cleared prior to becoming certified, along with their caregivers, frequent visitors, and any other adult residing in their home. We will continue to obtain criminal/child abuse clearance for foster parents/families and reiterate to foster parents of their responsibility to inform the FFA when there is change in the household composition so that they are always in compliance.

Recommendation 7: Ensure foster homes assessments are completed for homes where more than two children are placed

Effective immediately, further internal controls were put in place to ensure that home assessments are completed for certified foster home when two or more children are placed in the home. We will continue to make every effort to ensure that home assessments are completed when two or more children are placed in a home. (See Attachment)

Recommendation 8: Ensure that annual recertification of foster homes are conducted.

Quality assurance monitors will continue to monitor and evaluate the interior and exterior of all foster homes on a quarterly basis. We will continue to make every effort to ensure that annual re-certifications for all certified homes are completed in a timely manner.

Recommendation 9: Ensure children taking psychotropic medications are seen monthly by the prescribing physician.

Effective immediately, all ASW's were provided additional training to ensure that all children taking psychotropic medications are seen monthly by the prescribing physician. Additionally, ASW's will ensure that foster parents provide them with a copy of the monthly report from the doctor.

Recommendation 10: Ensure children's initial medical and dental examinations are conducted within the required timeframes.

Effective immediately, further internal controls were put in place to ensure that initial dental and medical examinations are completed within 30 days of placement. Social work staff will provide monthly written notification of the due date of initial dental Examinations for each child placed in the FFA. We will continue to make every effort to ensure that dental and medical examinations are conducted as required.

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Recommendation 11 Ensure NSPs contain all required information including goals that are specific, measurable, and time-limited.

Effective immediately during training, Social worker supervisors provided additional training for agency social workers on NSP's, with special focus on the development of goals for foster children that are specific, measurable, and time limited. We will continue to make every effort to ensure that NSP's are appropriately completed.

Recommendation 12 Ensure NSPs are approved by the DCFS social worker as required.

Effective immediately during training, all ASW's were instructed to fax copies of the needs and services plans to the CSW and retain/file the fax confirmation sheet as proof of submission. We will continue to make every effort to ensure that NSP's are approved by the CSW.

Recommendation 13 Ensure children and foster parents are offered the opportunity to participate in the development of the NSPs.

Effective immediately, all ASW's were trained and further instructed to meet with both the foster parent and the foster child when developing the NSP. The NSP agreement form was developed and will be used to verify that they participated in this report. We will continue to make every effort to ensure that NSP's are appropriately completed.

Recommendation 14 Ensure DCFS social workers are updated monthly regarding the children's progress.

Effective immediately, all ASW's were provided additional training to ensure that CSW's are updated monthly on the progress of the foster child. ASW's are instructed to print out monthly contact from foster trak indicating the purpose and date of contact with the Children Social Worker.

Recommendation 15: Ensure children and DCFS social workers receive a comprehensive overview of the Agency's policies.

Fred Jefferson FFA will continue to ensure that children and DCFS social workers receive an overview of the Agency's policies. Once a child is placed by DCFS, they are brought in for intake interview where they are informed of the agency's policies and procedures.

Recommendation 16: Ensure children are visited weekly during the first three month months of placement and twice a month, approximately 14 days a part, after the first three months of placement.

Effective immediately, during training and individual supervision with supervising social worker, ASW's were instructed of the importance of ensuring that foster children are seen weekly as required by our County contract. The agency has implemented a system that requires more intensive monitoring. The system of tracking visits and follow-up will be used to make workers more accountable. ASW's will turn in all weekly case notes to their supervisor for approval. The Supervisors will sign off on all case notes as indicated on the new attached forms. We will continue to provide ongoing training for our ASW's to ensure contract compliance. (See Attachment)

Recommendation 17: Ensure Quarterly Reports are prepared within the required timeframes and contain the data that were sent to the DCFS social worker.

Effective immediately, during training and individual supervision with supervising social worker, ASW's were instructed of the importance of ensuring that timely Quarterly Reports are prepared each quarter for all foster children. To make workers more accountable the agency has implemented a system that requires more intensive monitoring. ASW's will submit Quarterly Report to their supervisor for approval. The Supervisors will sign off review and edit reports as indicated on the new attached forms. We will continue to provide ongoing training for our ASW's to ensure contract compliance.

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Recommendation 18: Ensure Quarterly Reports include an Emancipation Preparation Contract for children who are 14 years of age and older.

Effective immediately, ASW's will ensure that Quarterly Reports include an Emancipation Preparation Contract for children who are 14 years of age and older. We will continue to provide ongoing training for our ASW's to ensure contract compliance.

Recommendation 19: Ensure Termination Reports include a summary of the Agency's records related to placement.

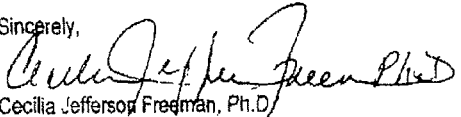
Effective immediately, the Agency has implemented a new Termination Report. All ASW's have been trained on the form. The new form clearly indicates all of the required and pertinent placement information on the foster child. (See Attachment)

Recommendation 20: Fred Jefferson management implement the four outstanding recommendations from the Fiscal Year 2005-06 monitoring report.

Please see our response to Recommendation 1, 10, 15, and 18 for our plan to implement the 4 outstanding recommendations for Fiscal Year 2005-06 monitoring report.

Fred Jefferson Memorial Foster Family Agency appreciates the Auditor-Controller's recommendations as we always strive to improve our performance and the quality of our service.

Sincerely,


Cecilia Jefferson Freeman, Ph.D.
CEO

WHERE CHILDREN COME FIRST!

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Fred Jefferson Memorial Foster Family Agency
1330 Long Beach Blvd.
Compton, CA. 90221
Facility # 197804218

Phone # (310) 763-1660

Fax # (310) 763-0357

MORE THAN TWO CHILDREN AUTHORIZATION

Foster Parent(s): _____ Date: _____

Address: _____

Telephone: _____

Date of Certification: _____ Number of Certified Beds: _____

Check all that apply:

- | Yes | No | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | The certified foster home is providing quality care for the currently placed children. |
| <input type="checkbox"/> | <input type="checkbox"/> | This certified foster home will be able to meet the needs of additional foster children. |
| <input type="checkbox"/> | <input type="checkbox"/> | This certified foster home has at least 12 months of experience in caring for foster children. |
| <input type="checkbox"/> | <input type="checkbox"/> | This certified home will be caring for siblings or teenagers. |

Comment:

#16

[illegible]

SOCIAL WORKER'S SIGNATURE _____

DATE _____ SUPERVISOR'S INITIALS _____ DATE _____

SUBMISSION GUIDELINES

CASE NOTES, ALLOWANCE LOGS, WEEKLY ACTIVITY LOGS & CLOTHING RECEIPTS ARE SUBMITTED ON THE 10TH OF EACH MONTH BY 3:00PM. ALL OTHER DOCUMENTS ARE SUBMITTED WHEN DUE. IF THE 10TH FALLS ON A SATURDAY OR SUNDAY REPORTS AND ALL SUPPORTING DOCUMENTS ARE TO BE SUBMITTED ON THE FIRST MONDAY AFTER THE 10TH BY 3:00PM. ANY RECEIPTS OR DOCUMENTS NOT SUBMITTED ON THE 10TH MUST BE SUBMITTED NO LATER THAN THE 15TH OF THE MONTH BY 3:00PM.

MY SIGNATURE ABOVE AFFIRMS MY UNDERSTANDING OF THE TIME FRAMES FOR SUBMISSION OF DOCUMENTS AND CLOTHING RECEIPTS.

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FRED JEFFERSON MEMORIAL FOSTER FAMILY AGENCY
1330 SOUTH LONG BEACH BLVD.
COMPTON, CA. 90221

PHONE: (310) 763-1660

FAX: (310) 763-0357

TERMINATION REPORT

Name of Child:

Date of Birth:

Case Name:

Case Number:

Reason for Placement:

Admission Date:

Name of CSW:

Agency Social Worker:

Reporting Period: _____ to _____

Date of Termination:

DESCRIPTION OF CHILD

- | | | | |
|------------------------------------|------------------------------------|--------------------------------|----------------------------------|
| 1. Size for Age | <input type="checkbox"/> Average | <input type="checkbox"/> Large | <input type="checkbox"/> Smaller |
| 2. Wears Glasses (need glasses) | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| 3. Is Depressed | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| 4. Is Hyperactive | <input type="checkbox"/> Somewhat | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Has Mental Illness | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| 6. Has Developmental Disabilities | <input type="checkbox"/> Somewhat | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7. Suspected Previous Sexual Abuse | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| 8. Acts Out Sexually | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 9. Has Neurological Impairment | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |

NAME AND CURRENT ADDRESS OF FOSTER HOME:

PERMANENCY PLAN: (STATE THE PERMANENCY PLAN, REUNIFICATION, LONG-TERM FOSTER CARE, ADOPTION, GUARDIANSHIP AND EMANCIPATION.)

PARENTAL/RELATIVE INVOLVEMENT

1. Parent visits:
2. Relative/ number of sibling visits:
3. Phone calls from parents/relatives:

PROGRESS IN FOSTER HOME:

- | | | | |
|-----------------------------------|------------------------------------|------------------------------|-----------------------------|
| 1. Good Peer Relationship | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Cooperative with Foster Parent | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Follow House Rules | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Manage personal care needs | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

5. Capable of managing cash resources ☐ Sometimes ☐ Yes ☐ No

EDUCATION:

1. Name: _____
2. Address: _____
3. Telephone # _____
4. Grade: _____ Teacher: _____
5. Attendance: _____
6. Special Education: (If Special Education, agency must have a copy of I.E.P.)
☐ Yes ☐ No
7. Completes Homework: ☐ Sometimes ☐ Yes ☐ No
8. Fights: ☐ Frequently ☐ Occasionally ☐ Yes ☐ No
9. Any Suspensions: ☐ Yes ☐ No
Reason and length of time suspended: _____
10. Academic Progress ☐ Good ☐ Average ☐ Poor

MEDICAL/DENTAL INFORMATION:

1. Last Medical Visit: _____

Name:
Address:
City:
Phone:

2. Last Dental Visit: _____

Name:
Address:
City:
Phone:

3. Name of specialist, if any:

4. Describe any physical problems:

5. List any childhood illness which occurred since last quarter:

6. Immunization current/needs:

PSYCHO - THERAPEUTIC INTERVENTION:

1. Individual Therapy:
Therapist:

2. Group Therapy:
Therapist:

3. Medication Evaluation :
Medication:

Psychiatrist:

4. Psychological Evaluation:
Psychologist:

Dates of foster home visits by Agency Social Worker : _____

Dates of CSW contact by Agency Social Worker _____

SIR's this reporting period [Date and description of the incident(s)]:

Termination Reasons: (circle appropriate reason)

- A. Adoption
- B. Another Foster Family Agency
- C. Guardianship
- D. AWOL
- E. Reunification/Relative
- F. Group home
- G. Emancipation

If the reason for termination is B, F, or E please state precipitating event(s).

ADDITIONAL COMMENT, IF APPLICABLE:

Submitted By:

Agency Social Worker

Date

Approved by:

Social Worker Supervisor

Date



PATRICIA S. PLOEHN, LCSW
Director

**County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES**

425 Shatto Place, Los Angeles, California 90020
(213) 351-5602

December 16, 2009

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TO: Aggie Alonso, Chief Accountant-Auditor
Countywide Contract Monitoring Division

FROM: Elizabeth A. Howard, Section Head
Out of Home Care Management Division
Foster Family Agency/Group Home Performance Management

**DCFS RESPONSE TO THE AUDITOR CONTROLLER'S CONTRACT REVIEW OF
FRED JEFFERSON MEMORIAL FOSTER FAMILY AGENCY**

The Auditor Controller's Contract Review of Fred Jefferson Memorial Foster Family Agency was conducted in June/July 2008. The Out of Home Care Management Division (OHCMD) received the Auditor-Controller's November 18, 2009 final draft report of the contract compliance review on November 18, 2009. The DCFS monitor reviewed the report on November 20, 2009. The A-C review found no egregious findings. The report did note that several of the homes were not in compliance with the County contract and CDSS Title 22 regulations, pertaining primarily to physical plant deficiencies. Lack of required documentation in certified foster parent files was also a notable finding. For example, there was no criminal clearance for one adult who frequently resided in one certified home. The A-C report did however indicate that subsequent to the review, the adult left the home and the foster parent signed a declaration that she will comply with the Agency's policy regarding criminal/child abuse clearance. Another review finding indicated that several children's files reviewed were missing documentation including but not limited to, monthly evaluations by physicians for the children taking psychotropic medications. DCFS has recently provided Fred Jefferson FFA with the current psychotropic medication policies and protocols. Finally, several NSP/Quarterly Reports were found deficient and several termination reports were incomplete. OHCMD will be providing NSP/Quarterly training to all providers on January 12, 2010.

The Auditor Controller approved Fred Jefferson FFA's Corrective Action Plan dated August 19, 2009 which includes the agency's plan for additional staff training. This training will address protocols related to psychotropic medications, and preparation of Needs and Service plans. Additionally, the agency has advised that they are implementing a more intensive internal monitoring system to assure timely attention to

"To Enrich Lives Through Effective and Caring Service"

**DCFS RESPONSE TO THE AUDITOR CONTROLLER'S CONTRACT REVIEW OF
FRED JEFFERSON MEMORIAL FOSTER FAMILY AGENCY
PAGE 2**

medical and dental needs, and thorough home assessments. The Agency's newly developed instruments were attached to their Corrective Action Plan.

The Out of Home Care Management Division (OHCMD) will conduct a follow-up review based on the A-C's recommendations within six months after the issuance of the A-C's final report.

If you have any questions, please contact me at (626) 569-6804.

MG:EAH:CR:EK

c: Brian Mahan, CEO, Children & Families Well-Being Cluster
Wendy L. Watanabe, Auditor-Controller
Patricia Ploehn, Director, DCFS
Lisa Parrish, Deputy Director, DCFS